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Bib Data Sheet

CONFIRMATION NO. 8941

<b>SERIAL NUMBER</b> 09/929,700	<b>FILING DATE</b> 08/13/2001 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> LOMAU.108CPDV1
<b>APPLICANTS</b> Yong Hua Zhu, Loma Linda, CA; Wolff M. Kirsch, Redlands, CA;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/325,982 06/04/1999 PAT 6,287,322 WHICH IS A CIP OF 09/092,282 06/05/1998 WHICH IS A CIP OF 08/984,757 12/04/1997 WHICH IS A CIP OF 08/943,369 10/03/1997 ABN WHICH IS A CIP OF 08/764,611 12/05/1996 PAT 6,004,341 WHICH CLAIMS BENEFIT OF 60/009,643 12/08/1995 * (*) Data inconsistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 09/11/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance Verified and Acknowledged <i>Dany G. G. G.</i> <i>AG</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 27
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 20995				
<b>TITLE</b> Tissue opening locator and everter and method				
<b>FILING FEE RECEIVED</b> 418	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	